

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2023"/> | <input type="text" value="42297.02"/> | <input type="text" value="42297.02"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="14416.10"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="24014.89"/> | <input type="text" value="208205.67"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="38430.99"/> | <input type="text" value="250502.69"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="36830.60"/> | <input type="text" value="248902.30"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1600.39"/> | <input type="text" value="1600.39"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 16693.05 | 100763.21 |
| (ii) Unitemized | 7321.84 | 107442.46 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 24014.89 | 208205.67 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 24014.89 | 208205.67 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 24014.89 | 208205.67 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 24014.89 | 208205.67 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 80.60 | 752.30 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 80.60 | 752.30 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 27000.00 | 186500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 9750.00 | 61650.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 36830.60 | 248902.30 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36830.60 | 248902.30 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 24014.89 | 208205.67 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 24014.89 | 208205.67 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 80.60 | 752.30 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 80.60 | 752.30 |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Anderson, Charles, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-67
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Anderson, Charles, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-67
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Andrews, Daryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-145
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.78 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Andrews, Daryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-145
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Avans, Hope, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 536.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-206
 Amount of Each Receipt this Period 30.19
 Memo Item

C. Avans, Hope, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 536.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-206
 Amount of Each Receipt this Period 30.19
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 75.64 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Badon, Ty, Allen, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Oncology |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-760

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Badon, Ty, Allen, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Oncology |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 21 | | 2023 |

Transaction ID : 2023091818498-759

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baldomir, Jason, A., ,

Mailing Address 5 Crescent Dr

| | | |
|----------------------|-------------|------------------------|
| City Philadelphia | State PA | Zip Code 19112-1001 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales and/or Marketing Training |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
629.88

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-225

Amount of Each Receipt this Period
36.10

Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 236.10 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Baldomir, Jason, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 629.88

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-225
 Amount of Each Receipt this Period 36.10
 Memo Item

B. Barnett, Brooke, Nicole, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-58
 Amount of Each Receipt this Period 15.21
 Memo Item

C. Barnett, Brooke, Nicole, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-58
 Amount of Each Receipt this Period 15.21
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 66.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Beetsch, Erin, Hufman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP & Head Medical Affairs, US
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-773
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Beetsch, Erin, Hufman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP & Head Medical Affairs, US
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-772
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Benen, Sandra, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-574
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 140.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Benen, Sandra, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-574
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Bergey, Amanda, Schroeder, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Business Development Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-742
 Amount of Each Receipt this Period 15.20
 Memo Item

C. Bergey, Amanda, Schroeder, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Business Development Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-741
 Amount of Each Receipt this Period 15.20
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.40 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Berlin, Robert, Joshua, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regulatory Affairs Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-777
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Berlin, Robert, Joshua, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regulatory Affairs Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-776
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Berry, Britt, Alicia, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-43
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Berry, Britt, Alicia, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-43
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Billington, John, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Health Security & Infectious
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-722
 Amount of Each Receipt this Period 15.21
 Memo Item

C. Billington, John, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Health Security & Infectious
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-722
 Amount of Each Receipt this Period 15.21
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 50.42 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Birla, Parag, , , | | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 | Transaction ID : 2023090118456-506 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.26"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Office Based Medical Affairs | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="274.68"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Birla, Parag, , , | | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 | Transaction ID : 2023091818498-506 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.26"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Office Based Medical Affairs | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="274.68"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Boone, Thomas, M., , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-451 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="44.27"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Sales Respiratory Biologics | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="783.84"/> | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="74.79"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Boone, Thomas, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Respiratory Biologics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 783.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-451
 Amount of Each Receipt this Period
 44.27
 Memo Item

B. Borton, Joel, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-245
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Borton, Joel, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-245
 Amount of Each Receipt this Period
 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 84.27 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Brignati, Michael, J, , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-768 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Occupation (for Individual) Lawyer/Attorney | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brignati, Michael, J, , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-767 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Occupation (for Individual) Lawyer/Attorney | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Broussard, Travis, William, , | | Date of Receipt |
| Mailing Address PO Box 13398 | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-658 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="16.30"/> |
| Occupation (for Individual) Rx Sales Field Leader | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="293.40"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="116.30"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|--|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Broussard, Travis, William, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-658 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 16.30 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 293.40 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Sales Field Leader | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brown, Brent, William George, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-66 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.26 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 274.68 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales Force Effectiveness (Oncology) | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Brown, Brent, William George, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-66 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.26 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 274.68 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales Force Effectiveness (Oncology) | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 46.82 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Bryce, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 876.82

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-82
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Bryce, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 876.82

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-82
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Bulchandani, Anil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-24
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bulchandani, Anil, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-24 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.26 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Pricing/Reimbursement | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 274.68 | | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cain, James, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-753 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 70.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Resp Biologic | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1260.00 | | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cain, James, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-752 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 70.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Resp Biologic | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 1260.00 | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Calderaro, Maria, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-456 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 22.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Oncology | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 348.82 | | |

| | | | |
|---|------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Calderaro, Maria, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-456 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 22.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Oncology | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 348.82 | | |

| | | | |
|---|-------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Calvo, Michael, Javier, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-724 |
| Mailing Address 1050 K St NW Ste 800 | | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20001-4450 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 1800.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 144.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Calvo, Michael, Javier, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-724
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Cavalier, Kenneth, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.84

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-327
 Amount of Each Receipt this Period
 70.00
 Memo Item

C. Cavalier, Kenneth, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.84

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-327
 Amount of Each Receipt this Period
 70.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 240.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Chael, Alexander, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-37
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Chael, Alexander, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-37
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Cionci, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 732.48

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-634
 Amount of Each Receipt this Period 41.16
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 71.68 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Cionci, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 732.48

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-634
 Amount of Each Receipt this Period 41.16
 Memo Item

B. Clement, Sherrill, Thompson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-733
 Amount of Each Receipt this Period 22.00
 Memo Item

C. Clement, Sherrill, Thompson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-732
 Amount of Each Receipt this Period 22.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 85.16 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cloud, Monica, R, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-793 |
| Mailing Address 1050 K St NW Ste 800 | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20001-4450 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Director Federal Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cloud, Monica, R, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-792 |
| Mailing Address 1050 K St NW Ste 800 | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20001-4450 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Director Federal Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Costello, Jennifer, B., , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-232 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Market Access Field Vice President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 273.78 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 215.21 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Costello, Jennifer, B., ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Market Access Field Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-232

Amount of Each Receipt this Period 15.21

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cruz, Christian, Omar, ,

Mailing Address 1050 K St NW Ste 800

City Washington State DC Zip Code 20001-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Public Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-747

Amount of Each Receipt this Period 15.20

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cruz, Christian, Omar, ,

Mailing Address 1050 K St NW Ste 800

City Washington State DC Zip Code 20001-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Public Policy

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-746

Amount of Each Receipt this Period 15.20

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.61

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Dagne, Haile, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Policy & Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-805
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Dagne, Haile, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Policy & Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-804
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Dally, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Rd
 City King Of Prussia State PA Zip Code 19406-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-310
 Amount of Each Receipt this Period 70.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 210.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Dally, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Rd
 City King Of Prussia State PA Zip Code 19406-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-310
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Davis, Labert, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Regional Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 743.51

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-377
 Amount of Each Receipt this Period 42.01
 Memo Item

C. Davis, Labert, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Regional Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 743.51

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-377
 Amount of Each Receipt this Period 42.01
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 154.02 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Dekrey, Steven, M, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-598 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.20 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Sales Spec, Pharma | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.60 | | | |

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dekrey, Steven, M, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-598 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.20 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Sales Spec, Pharma | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.60 | | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Demott, Eric, T., , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-169 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 34.46 | | |
| City Durham | State NC | Zip Code 27709-3398 | Memo Item <input type="checkbox"/> | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 610.97 | | | |

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|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 64.86 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Demott, Eric, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.97

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-169
 Amount of Each Receipt this Period 34.46
 Memo Item

B. Dennis, Ann, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 449.96

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-28
 Amount of Each Receipt this Period 25.34
 Memo Item

C. Dennis, Ann, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 449.96

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-28
 Amount of Each Receipt this Period 25.34
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 85.14 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Diperrio, Pamela, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-516
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Diperrio, Pamela, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-516
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Dixon, Freeman, Dwayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-789
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Dixon, Freeman, Dwayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-788
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Dodd, Kristi, Rigney, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vx Contracting Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.47

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-328
 Amount of Each Receipt this Period 35.84
 Memo Item

C. Dodd, Kristi, Rigney, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vx Contracting Acct Mgr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 634.47

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-328
 Amount of Each Receipt this Period 35.84
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 121.68 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Ducker, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-712
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Ducker, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-712
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Duff, Jacqueline, Weisen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales & Marketing Combined
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-688
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Duff, Jacqueline, Weisen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27701-3986 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales & Marketing Combined |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 09 / 21 / 2023
Transaction ID : 2023091818498-688

Amount of Each Receipt this Period
 20.00

Memo Item

B. Ebersole, David, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) District Sales Mgr |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 09 / 06 / 2023
Transaction ID : 2023090118456-103

Amount of Each Receipt this Period
 20.00

Memo Item

C. Ebersole, David, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) District Sales Mgr |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 09 / 21 / 2023
Transaction ID : 2023091818498-103

Amount of Each Receipt this Period
 20.00

Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Edge, Heather, Simmons, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Regional Vx |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-204

Amount of Each Receipt this Period
30.00

Memo Item

B. Edge, Heather, Simmons, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Regional Vx |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 21 | | 2023 |

Transaction ID : 2023091818498-204

Amount of Each Receipt this Period
30.00

Memo Item

C. Edwards, Janet, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Specialty Account Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-289

Amount of Each Receipt this Period
20.00

Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 80.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Edwards, Janet, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-289 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 20.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | | |

| | | | |
|---|-------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Efantis, Amy, Jo, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-784 |
| Mailing Address 1050 K St NW Ste 800 | | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20001-4450 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) VP, Government Affairs and Public Poli | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1800.00 | | |

| | | | |
|---|-------------------------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Efantis, Amy, Jo, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-783 |
| Mailing Address 1050 K St NW Ste 800 | | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20001-4450 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) VP, Government Affairs and Public Poli | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 1800.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 220.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. El-Amin, Deborah, Summerlin, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-804 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 50.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 550.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management ViiV | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. El-Amin, Deborah, Summerlin, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-803 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 50.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 550.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management ViiV | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Endres, Jennean, Marie, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-219 | | |
| Mailing Address 2929 Walnut Street | | | Amount of Each Receipt this Period 100.00 | | |
| City Philadelphia | State PA | Zip Code 19104-5054 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 1800.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Lawyer/Attorney | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Endres, Jennean, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-219
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Erickson, Scott, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 603.90

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-566
 Amount of Each Receipt this Period 33.55
 Memo Item

C. Erickson, Scott, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 603.90

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-566
 Amount of Each Receipt this Period 33.55
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 167.10 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Esposito, Anthony, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Market Access, Strategic Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-785
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Esposito, Anthony, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Market Access, Strategic Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-784
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Estep, Jason, Brent, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.24

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-237
 Amount of Each Receipt this Period 19.18
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 69.18 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Estep, Jason, Brent, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.24

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-237
 Amount of Each Receipt this Period 19.18
 Memo Item

B. Etzel, Merritt, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, Nucala
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.42

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-450
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Etzel, Merritt, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, Nucala
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.42

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-450
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 119.18 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fanutti, Julie, Ann, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-222 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.26 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Oncology | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 274.68 | | |

| | | | |
|---|---|------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fanutti, Julie, Ann, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-222 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.26 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Oncology | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 274.68 | | |

| | | | |
|---|--|------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fleming, Jeffrey, , , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-728 |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 20.00 |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Assistant General Counsel, Pharma R&I | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 360.00 | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fleming, Jeffrey, , , | | | Date of Receipt |
| Mailing Address 1250 S Collegeville Rd | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Collegeville | State PA | Zip Code 19426-2990 | Transaction ID : 2023091818498-728 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="20.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Assistant General Counsel, Pharma R& | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="360.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Flynn, Patrick, J, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-514 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Retail Integrated Acct Lead Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Flynn, Patrick, J, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-514 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Retail Integrated Acct Lead Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="120.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Foster, Kristine, Fort, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.82

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-342
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Foster, Kristine, Fort, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.82

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-342
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Fox, Jennifer, Willis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-299
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Fox, Jennifer, Willis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-299
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Furgason, Jamie, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-238
 Amount of Each Receipt this Period
 25.91
 Memo Item

C. Furgason, Jamie, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 456.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-238
 Amount of Each Receipt this Period
 25.91
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 151.82 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Furuya, Chris, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-64
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Furuya, Chris, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-64
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Gahamanyi, Christelle, Kayirangwa, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Business Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-801
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 130.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Gahamanyi, Christelle, Kayirangwa, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Business Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-800
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Gallagher, Rustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-695
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Gallagher, Rustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-695
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galloway, Bijal, , ,

Mailing Address 406 and 410 Blackwell Street
Fowler and Crowe Building

City Durham State NC Zip Code 27701-3986

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing, Benlysta

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-690

Amount of Each Receipt this Period 15.21

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galloway, Bijal, , ,

Mailing Address 406 and 410 Blackwell Street
Fowler and Crowe Building

City Durham State NC Zip Code 27701-3986

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing, Benlysta

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-690

Amount of Each Receipt this Period 15.21

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Getz, Eileen, P., ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 437.15

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-154

Amount of Each Receipt this Period 26.15

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 56.57

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Getz, Eileen, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-154
 Amount of Each Receipt this Period 26.15
 Memo Item

B. Goetz, Athena, Pangan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-702
 Amount of Each Receipt this Period 16.30
 Memo Item

C. Goetz, Athena, Pangan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-702
 Amount of Each Receipt this Period 16.30
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 58.75 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Goldberg, Ronald, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Thought Leader Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 694.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-541
 Amount of Each Receipt this Period 38.83
 Memo Item

B. Goldberg, Ronald, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Thought Leader Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 694.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-541
 Amount of Each Receipt this Period 38.83
 Memo Item

C. Goodwin, Melissa, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Resp Biologic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-403
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 127.66 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Goodwin, Melissa, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Resp Biologic
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-403
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Gorycki, Peter, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) DMPK Project Specialist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 796.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-193
 Amount of Each Receipt this Period
 44.92
 Memo Item

C. Gorycki, Peter, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) DMPK Project Specialist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 796.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-193
 Amount of Each Receipt this Period
 44.92
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 139.84 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Grady, Cleveland, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Field Vice Pres |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-95

Amount of Each Receipt this Period
 20.20

Memo Item

B. Grady, Cleveland, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Field Vice Pres |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-95

Amount of Each Receipt this Period
 20.20

Memo Item

C. Graham, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd

| | | |
|----------------------|-------------|------------------------|
| City Collegeville | State PA | Zip Code 19426-2990 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Senior Vice President Value Evidence a |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-715

Amount of Each Receipt this Period
 62.50

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 102.90 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Graham, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Vice President Value Evidence a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-715
 Amount of Each Receipt this Period
 62.50
 Memo Item

B. Grandison, Regina, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-530
 Amount of Each Receipt this Period
 15.20
 Memo Item

C. Grandison, Regina, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-530
 Amount of Each Receipt this Period
 15.20
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 92.90 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Greengrove, Kathryn, Anne, , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-333 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="15.21"/> |
| Occupation (for Individual) Sr. Director US Pharma Commercial Op | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="273.78"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Greengrove, Kathryn, Anne, , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-333 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="15.21"/> |
| Occupation (for Individual) Sr. Director US Pharma Commercial Op | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="273.78"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gwaltney, Terry, R, , | | Date of Receipt |
| Mailing Address PO Box 13398 | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-763 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="22.00"/> |
| Occupation (for Individual) Solid Tumor Oncology Account Manage | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="396.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="52.42"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Gwaltney, Terry, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Solid Tumor Oncology Account Manage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-762
 Amount of Each Receipt this Period 22.00
 Memo Item

B. Hall, Denise, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Litigation Data Requests Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-110
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Hall, Denise, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Litigation Data Requests Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-110
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 52.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Hamilton, Jeffrey, Thomas, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Head Payer Partnership
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-748
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Hamilton, Jeffrey, Thomas, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Head Payer Partnership
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-747
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Harbour, James, Henry, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2013.60

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-258
 Amount of Each Receipt this Period 115.20
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 215.20 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | | | | | | | | | |
|---|-------------|---|--|-------------|---|-------|---|-------------|----|--|----|--|------|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Harbour, James, Henry, , | | | Date of Receipt | | | | | | | | | | |
| Mailing Address PO Box 13398 | | | <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>21</td> <td></td> <td>2023</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 09 | | 21 | | 2023 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 09 | | 21 | | 2023 | | | | | | | | | |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-258 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | Amount of Each Receipt this Period 115.20 | | | | | | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Field VP | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 2013.60 | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|---|-------------|---|--|-------------|---|-------|---|-------------|----|--|----|--|------|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Harmon, Jennifer, S., , | | | Date of Receipt | | | | | | | | | | |
| Mailing Address PO Box 13398 | | | <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>06</td> <td></td> <td>2023</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 09 | | 06 | | 2023 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 09 | | 06 | | 2023 | | | | | | | | | |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-296 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | Amount of Each Receipt this Period 31.70 | | | | | | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Vaccines | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 562.06 | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|---|-------------|---|--|-------------|---|-------|---|-------------|----|--|----|--|------|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Harmon, Jennifer, S., , | | | Date of Receipt | | | | | | | | | | |
| Mailing Address PO Box 13398 | | | <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>21</td> <td></td> <td>2023</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 09 | | 21 | | 2023 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 09 | | 21 | | 2023 | | | | | | | | | |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-296 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | Amount of Each Receipt this Period 31.70 | | | | | | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Vaccines | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 562.06 | | | | | | | | | | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 178.60 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harter, Carie, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) FVP Government Relations & Advocacy |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
892.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-700

Amount of Each Receipt this Period
50.35

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harter, Carie, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) FVP Government Relations & Advocac |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
892.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-700

Amount of Each Receipt this Period
50.35

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Haselwander, Mark, A, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr Acct Spec, Vaccines |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-681

Amount of Each Receipt this Period
15.20

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 115.90 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 57 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Haselwander, Mark, A, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-681 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.20"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="273.60"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hashey, Kathryn, , , | | | Date of Receipt |
| Mailing Address 5 Crescent Dr | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Philadelphia | State PA | Zip Code 19112-1001 | Transaction ID : 2023090118456-720 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="22.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Government Relations | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="374.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hashey, Kathryn, , , | | | Date of Receipt |
| Mailing Address 5 Crescent Dr | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Philadelphia | State PA | Zip Code 19112-1001 | Transaction ID : 2023091818498-720 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="22.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Government Relations | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="374.00"/> | | |

| | |
|---|------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="59.20"/> |
| TOTAL This Period (last page this line number only)..... | <input type="text"/> |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Hauser, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Payer Acct Dir, Market Access |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-471

Amount of Each Receipt this Period
15.26

Memo Item

B. Hauser, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Payer Acct Dir, Market Access |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-471

Amount of Each Receipt this Period
15.26

Memo Item

C. Helgeson, Beth, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Vx Federal Acct Mgr |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-34

Amount of Each Receipt this Period
25.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 55.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 59 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Helgeson, Beth, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vx Federal Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-34
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Henderson, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Community Partnership
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-158
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Henderson, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Community Partnership
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-158
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 65.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|------------------------------------|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hickox, Margaret, Grey, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-419 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 22.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Sales Primary Care | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 396.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hickox, Margaret, Grey, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-419 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 22.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Sales Primary Care | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 396.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hill, Wanda, , , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-692 |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) GAPP Special Projects - Secondment | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 1470.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 144.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hill, Wanda, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-692 | | |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 | | |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) GAPP Special Projects - Secondment | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1470.00 | | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hoch, Jeffrey, Scott, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-297 | | |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 15.26 | | |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Global Marketing Director, ANORO | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 274.68 | | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hoch, Jeffrey, Scott, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-297 | | |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 15.26 | | |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Global Marketing Director, ANORO | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 274.68 | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Hofer, Steve, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Strategic Account Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.75

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-605
 Amount of Each Receipt this Period 40.93
 Memo Item

B. Hofer, Steve, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Strategic Account Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.75

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-605
 Amount of Each Receipt this Period 40.93
 Memo Item

C. Holdaway, Cindy, D.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 442.80

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-72
 Amount of Each Receipt this Period 25.09
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 106.95 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Holdaway, Cindy, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-72
 Amount of Each Receipt this Period
 25.09
 Memo Item

B. Houston, Laura, Karen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Resp Biologic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-381
 Amount of Each Receipt this Period
 27.72
 Memo Item

C. Houston, Laura, Karen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Resp Biologic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-381
 Amount of Each Receipt this Period
 27.72
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 80.53 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Howell, William, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-667
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Howell, William, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-667
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Hull, John, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 484.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-275
 Amount of Each Receipt this Period 27.26
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 57.78 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 65 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hull, John, M., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales Spec, Pharma |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
484.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-275

Amount of Each Receipt this Period
27.26

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hulse, Donna, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Specialty Account Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-146

Amount of Each Receipt this Period
15.26

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hulse, Donna, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Specialty Account Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-146

Amount of Each Receipt this Period
15.26

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 57.78 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jacques, Lyndsey, S, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-401 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 20.92 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 369.28 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jacques, Lyndsey, S, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-401 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 20.92 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 369.28 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. James, Paul, Michael, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-704 | | |
| Mailing Address 709 Swedeland Rd | | | Amount of Each Receipt this Period 20.00 | | |
| City King Of Prussia | State PA | Zip Code 19406-2711 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 360.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Lab Engineer | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 61.84 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. James, Paul, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Rd
 City King Of Prussia State PA Zip Code 19406-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lab Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-704
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Johnson, Kathleen, Casey, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-694
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Johnson, Kathleen, Casey, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, ViiV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-694
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 68 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Jorgensen, Julie, Tangeman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-280
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Jorgensen, Julie, Tangeman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-280
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Kenemer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Customer Experience & Digital Inno
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-740
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kenemer, Andrew, , , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-739 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 100.00 |
| City Durham | State NC | |
| Zip Code 27701-3986 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) VP, Customer Experience & Digital Innc | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1800.00 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. King, Jade, Finley, , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-223 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 20.00 |
| City Durham | State NC | |
| Zip Code 27701-3986 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) External Communications Enterprise | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. King, Jade, Finley, , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-223 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 20.00 |
| City Durham | State NC | |
| Zip Code 27701-3986 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) External Communications Enterprise | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 360.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 140.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 70 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Kita, Charles, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director DevOps
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-337
 Amount of Each Receipt this Period 21.74
 Memo Item

B. Kita, Charles, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director DevOps
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-337
 Amount of Each Receipt this Period 21.74
 Memo Item

C. Koopman, Cheryl, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-750
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 93.48 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 71 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Koopman, Cheryl, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 09 / 21 / 2023
Transaction ID : 2023091818498-749
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Kowalski, Andrew, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.37

Date of Receipt
 09 / 06 / 2023
Transaction ID : 2023090118456-30
 Amount of Each Receipt this Period 25.59
 Memo Item

C. Kowalski, Andrew, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.37

Date of Receipt
 09 / 21 / 2023
Transaction ID : 2023091818498-30
 Amount of Each Receipt this Period 25.59
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 101.18 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kropp, Carl, Lee, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Specialty Account Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
611.85

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-77

Amount of Each Receipt this Period
34.54

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kropp, Carl, Lee, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Specialty Account Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
611.85

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 21 | | 2023 |

Transaction ID : 2023091818498-77

Amount of Each Receipt this Period
34.54

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Laca, Gaspar, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Director State Government Affairs |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2927.58

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-179

Amount of Each Receipt this Period
208.33

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 277.41 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 73 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Laca, Gaspar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2927.58

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-179
 Amount of Each Receipt this Period 208.33
 Memo Item

B. Lee, Marcia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 474.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-746
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Lee, Marcia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 474.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-745
 Amount of Each Receipt this Period 35.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 278.33 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Russell, E., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr Sales Spec, Pharma |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.09

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-537

Amount of Each Receipt this Period
33.15

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Russell, E., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr Sales Spec, Pharma |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.09

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 21 | | 2023 |

Transaction ID : 2023091818498-537

Amount of Each Receipt this Period
33.15

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, Anton, D., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Mgmt National MA (Sales B |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-4

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 166.30 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 75 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|--|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lewis, Anton, D, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-4 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="100.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Mgmt National MA (Sales B | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="1800.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lewis, Robin, Margaret, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-699 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.26"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Director Specialty Strategic Accou | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="274.68"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lewis, Robin, Margaret, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-699 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.26"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Director Specialty Strategic Accou | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="274.68"/> | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="130.52"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 76 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Liles, Carol, Ann, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-70 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 70.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Mgr, Vaccines | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1260.00 | | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Liles, Carol, Ann, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-70 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 70.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Mgr, Vaccines | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1260.00 | | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Logan, Melinda, Kay, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-434 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.20 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 273.60 | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.20 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 77 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Logan, Melinda, Kay, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-434
 Amount of Each Receipt this Period 15.20
 Memo Item

B. Lorber, Leah, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1767.99

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-406
 Amount of Each Receipt this Period 99.68
 Memo Item

C. Lorber, Leah, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1767.99

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-406
 Amount of Each Receipt this Period 99.68
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 214.56 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 78 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Loughlin, Catherine, , , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-93 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.20 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Vice President, US Specialty and Oncol | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 273.60 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Loughlin, Catherine, , , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-93 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.20 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Vice President, US Specialty and Onco | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 273.60 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lowry, Christopher, , , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-734 |
| Mailing Address 2929 Walnut Street | | Amount of Each Receipt this Period 20.00 |
| City Philadelphia | State PA | Zip Code 19104-5054 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales Operations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 360.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.40 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 79 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|--|----------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lowry, Christopher, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-733 | | |
| Mailing Address 2929 Walnut Street | | | Amount of Each Receipt this Period 20.00 | | |
| City Philadelphia | State PA | Zip Code 19104-5054 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 360.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales Operations | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|----------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lynch, Gwenda, Lynne, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-180 | | |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | Amount of Each Receipt this Period 36.90 | | |
| City Durham | State NC | Zip Code 27701-3986 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 654.26 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Consumer Marketing Manager, Benlyst | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|----------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lynch, Gwenda, Lynne, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-180 | | |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | Amount of Each Receipt this Period 36.90 | | |
| City Durham | State NC | Zip Code 27701-3986 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 654.26 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Consumer Marketing Manager, Benlyst | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 93.80 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 80 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Macrae, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) SVP & General Counsel US Commercial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
 09 / 06 / 2023
Transaction ID : 2023090118456-408
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Macrae, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) SVP & General Counsel US Commercial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
 09 / 21 / 2023
Transaction ID : 2023091818498-408
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Magee, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 589.40

Date of Receipt
 09 / 06 / 2023
Transaction ID : 2023090118456-555
 Amount of Each Receipt this Period 34.46
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 174.46 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 81 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Magee, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 589.40

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-555
 Amount of Each Receipt this Period 34.46
 Memo Item

B. Mahoya, Farai, Tsakani, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-696
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Mahoya, Farai, Tsakani, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-696
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 74.46 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 82 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mann, Howard, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.08

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-210
 Amount of Each Receipt this Period 25.75
 Memo Item

B. Mann, Howard, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.08

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-210
 Amount of Each Receipt this Period 25.75
 Memo Item

C. Mariencheck, Joseph, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.29

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-240
 Amount of Each Receipt this Period 25.29
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 76.79 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 83 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mariencheck, Joseph, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.29

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-240
 Amount of Each Receipt this Period 25.29
 Memo Item

B. Marsaglia, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-421
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Marsaglia, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-421
 Amount of Each Receipt this Period 30.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 85.29 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 84 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Martin, Lisa, , , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-736 | | |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 | | |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Chief Procurement Officer | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1800.00 | | | |

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Martin, Lisa, , , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-735 | | |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 | | |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Chief Procurement Officer | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1800.00 | | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Martinez-Davis, Maria, Elena, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-754 | | |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 208.33 | | |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) President US Pharmaceuticals | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 3749.94 | | | |

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|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 408.33 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 85 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Martinez-Davis, Maria, Elena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) President US Pharmaceuticals
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3749.94

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-753
 Amount of Each Receipt this Period 208.33
 Memo Item

B. McCormick, Kenneth, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Payer Field Vice President, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-725
 Amount of Each Receipt this Period 25.00
 Memo Item

C. McCormick, Kenneth, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Payer Field Vice President, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-725
 Amount of Each Receipt this Period 25.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 258.33 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 86 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. McGowan, Robert, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Payer Acct Dir, Market Access
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-550
 Amount of Each Receipt this Period 45.97
 Memo Item

B. McGowan, Robert, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Payer Acct Dir, Market Access
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-550
 Amount of Each Receipt this Period 45.97
 Memo Item

C. Michel, Elizabeth, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Director Patient Experience
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-157
 Amount of Each Receipt this Period 15.20
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 107.14 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 87 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Michel, Elizabeth, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Director Patient Experience
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-157
 Amount of Each Receipt this Period 15.20
 Memo Item

B. Miller, Eric, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 592.89

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-156
 Amount of Each Receipt this Period 33.44
 Memo Item

C. Miller, Eric, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 592.89

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-156
 Amount of Each Receipt this Period 33.44
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 82.08 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 88 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Miller, Michele, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Pricing & Market Access Disease
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1958.20

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-452
 Amount of Each Receipt this Period 110.64
 Memo Item

B. Miller, Michele, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Pricing & Market Access Disease
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1958.20

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-452
 Amount of Each Receipt this Period 110.64
 Memo Item

C. Mitchell, Scott, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Professional
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 437.77

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-607
 Amount of Each Receipt this Period 24.76
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 246.04 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 89 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mitchell, Scott, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.77

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-607
 Amount of Each Receipt this Period 24.76
 Memo Item

B. Mollison, Scot, Ronald, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-608
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Mollison, Scot, Ronald, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-608
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 55.28 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 90 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Molloy, Kim, Krause, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-344 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 18.12 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 322.45 | | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Molloy, Kim, Krause, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-344 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 18.12 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 322.45 | | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Monnier, Michelle, M, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-445 | | |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 15.26 | | |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales and/or Marketing Training | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 274.68 | | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 51.50 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 91 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Monnier, Michelle, M, , | | | Date of Receipt |
| Mailing Address 5 Crescent Dr | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Philadelphia | State PA | Zip Code 19112-1001 | Transaction ID : 2023091818498-445 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.26"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales and/or Marketing Training | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="274.68"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Montano, Antonio, , , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-35 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="16.30"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="293.40"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Montano, Antonio, , , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-35 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="16.30"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="293.40"/> | | |

| | |
|---|------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="47.86"/> |
| TOTAL This Period (last page this line number only)..... | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 92 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Moseley, Emily, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-147
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Moseley, Emily, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-147
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Mott, Amanda, Grashof, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Market Access
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-766
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 93 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mott, Amanda, Grashof, , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-765 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="100.00"/> |
| Occupation (for Individual) VP Market Access | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="1800.00"/> | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mullen, Sheri, , , | | Date of Receipt |
| Mailing Address 2929 Walnut Street | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Philadelphia | State PA | Zip Code 19104-5054 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-604 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="62.71"/> |
| Occupation (for Individual) SVP Specialty Business Unit, US Pharr | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="1066.07"/> | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mullen, Sheri, , , | | Date of Receipt |
| Mailing Address 2929 Walnut Street | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Philadelphia | State PA | Zip Code 19104-5054 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-604 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Amount of Each Receipt this Period <input type="text" value="0.00"/> |
| Occupation (for Individual) SVP Specialty Business Unit, US Pharr | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="1066.07"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="162.71"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 94 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neilson, Nicholas, James, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Manager, Field Reimbursement, Regior |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-730

Amount of Each Receipt this Period
15.20

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neilson, Nicholas, James, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Manager, Field Reimbursement, Regior |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-729

Amount of Each Receipt this Period
15.20

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nevins, Neysa, , ,

Mailing Address 1250 S Collegeville Rd

| | | |
|----------------------|-------------|------------------------|
| City Collegeville | State PA | Zip Code 19426-2990 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Scientific Leader |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-488

Amount of Each Receipt this Period
15.26

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.66 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 95 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nevins, Neysa, , , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-488 | | |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 15.26 | | |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 274.68 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Scientific Leader | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Novis, Stephen, F, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-578 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 50.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 900.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Community Government Relations Dire | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Novis, Stephen, F, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-578 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 50.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 900.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Community Government Relations Direc | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 96 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. O'Neill, Kelly, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 N Bridge St/206 N BiddleSt
 City Marietta State PA Zip Code 17547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Operational QA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-329
 Amount of Each Receipt this Period 15.20
 Memo Item

B. O'Neill, Kelly, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 N Bridge St/206 N BiddleSt
 City Marietta State PA Zip Code 17547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Operational QA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-329
 Amount of Each Receipt this Period 15.20
 Memo Item

C. Oates, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, HRBL US Pharmaceutic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-503
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.40
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 97 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Oates, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, HRBL US Pharmaceutic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-503
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Olesen, Soren, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Regional Vx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 617.02

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-593
 Amount of Each Receipt this Period 34.80
 Memo Item

C. Olesen, Soren, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Regional Vx
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 617.02

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-593
 Amount of Each Receipt this Period 34.80
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 119.60 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 98 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Oliff, Allen, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-502
 Amount of Each Receipt this Period 21.74
 Memo Item

B. Oliff, Allen, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-502
 Amount of Each Receipt this Period 21.74
 Memo Item

C. Otranto, Nickolas, Charles, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement (Oncology)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-787
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 93.48 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 99 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Otranto, Nickolas, Charles, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement (Oncology)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-786
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Palmer, Ronald, Vincent, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-779
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Palmer, Ronald, Vincent, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-778
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 150.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 100 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Paluch, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-466
 Amount of Each Receipt this Period
 31.87
 Memo Item

B. Paluch, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-466
 Amount of Each Receipt this Period
 31.87
 Memo Item

C. Papanickolas, Yvonne, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-680
 Amount of Each Receipt this Period
 15.26
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 79.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 101 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Papanickolas, Yvonne, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-680
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Parham, Stephanie, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9911 Belward Campus Dr
 City Rockville State MD Zip Code 20850-3984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Process Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-800
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Parham, Stephanie, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9911 Belward Campus Dr
 City Rockville State MD Zip Code 20850-3984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Process Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-799
 Amount of Each Receipt this Period 70.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 155.26 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 102 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parker, Debra, D., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales Spec Pharma |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-104

Amount of Each Receipt this Period
15.26

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parker, Debra, D., ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sales Spec Pharma |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-104

Amount of Each Receipt this Period
15.26

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Paul, Maureen, Rose, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Channel Acct Dir, Market Access |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-455

Amount of Each Receipt this Period
15.26

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.78 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 103 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Paul, Maureen, Rose, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Channel Acct Dir, Market Access
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-455
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Peck, Kristen, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-352
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Peck, Kristen, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-352
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.78 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 104 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|----------|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Perkins, Christopher, Michael, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-796 |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Senior Manager, Cyber Intelligence | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 700.00 | |

| | | | |
|---|----------|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Perkins, Christopher, Michael, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-795 |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 100.00 |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Senior Manager, Cyber Intelligence | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 700.00 | |

| | | | |
|---|----------|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Phillips, Claire, Mimikos, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-88 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | Amount of Each Receipt this Period 42.70 |
| City Durham | State NC | Zip Code 27701-3986 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Product/Brand Management Rx | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 755.72 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 242.70 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 105 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|-------------|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Phillips, Claire, Mimikos, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-88 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | Amount of Each Receipt this Period 42.70 |
| City Durham | State NC | Zip Code 27701-3986 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Product/Brand Management Rx | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 755.72 | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ponder, Gail, S, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-189 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 33.25 |
| City Durham | State NC | Zip Code 27709-3398 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 591.71 | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ponder, Gail, S, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-189 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 33.25 |
| City Durham | State NC | Zip Code 27709-3398 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 591.71 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 109.20 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 106 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Powers, John, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 818.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-267
 Amount of Each Receipt this Period 45.97
 Memo Item

B. Powers, John, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 818.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-267
 Amount of Each Receipt this Period 45.97
 Memo Item

C. Pranzo, Marielena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Medical Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-484
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 107.20 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 107 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pranzo, Marielena, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-484 | | |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | | Amount of Each Receipt this Period 15.26 | | |
| City Durham | State NC | Zip Code 27701-3986 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 274.68 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Director, Medical Operations | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Presson, Jeffrey, G., , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-788 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 20.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 360.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Senior Director, Trade and Distributio | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Presson, Jeffrey, G., , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-787 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 20.00 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 360.00 | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Senior Director, Trade and Distributio | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 108 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Ramaswami, SRikant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Head of US Commercial Communic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-762
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Ramaswami, SRikant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Head of US Commercial Communi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-761
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Rancourt, Randy, Aime, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1958.71

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-531
 Amount of Each Receipt this Period 110.47
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 310.47 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 109 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rancourt, Randy, Aime, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1958.71

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-531
 Amount of Each Receipt this Period 110.47
 Memo Item

B. Retzlaff Leeding, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 478.19

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-590
 Amount of Each Receipt this Period 26.92
 Memo Item

C. Retzlaff Leeding, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 478.19

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-590
 Amount of Each Receipt this Period 26.92
 Memo Item

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 164.31 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 110 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rhyne, Curtis, Eubanks, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-764 |
| Mailing Address 1050 K St NW Ste 800 | | Amount of Each Receipt this Period 20.00 |
| City Washington | State DC | Zip Code 20001-4450 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rhyne, Curtis, Eubanks, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-763 |
| Mailing Address 1050 K St NW Ste 800 | | Amount of Each Receipt this Period 20.00 |
| City Washington | State DC | Zip Code 20001-4450 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ribeiro, Sandra, Mendes, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-738 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 20.00 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 300.00 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 111 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Ribeiro, Sandra, Mendes, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-737
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Riordan, Julie, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.79

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-270
 Amount of Each Receipt this Period 18.74
 Memo Item

C. Riordan, Julie, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.79

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-270
 Amount of Each Receipt this Period 18.74
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 57.48 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 112 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Roberts, Andrea, Rene, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-703 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.78 | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Roberts, Andrea, Rene, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-703 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr. Specialty Account Specialist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.78 | |

| | | | |
|---|-------------|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Roberts, Jacqueline, A, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-224 |
| Mailing Address 5 Crescent Dr | | | Amount of Each Receipt this Period 15.20 |
| City Philadelphia | State PA | Zip Code 19112-1001 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sales Force Effectiveness | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 273.60 | |

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|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.62 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 113 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Roberts, Jacqueline, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Force Effectiveness
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.60

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-224
 Amount of Each Receipt this Period 15.20
 Memo Item

B. Roberts, Mary, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, GSK US Market Access
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-786
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Roberts, Mary, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, GSK US Market Access
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-785
 Amount of Each Receipt this Period 70.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 155.20 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 114 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Robinson-Pugh, Gwendolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 710.63

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-197
 Amount of Each Receipt this Period 40.16
 Memo Item

B. Robinson-Pugh, Gwendolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 710.63

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-197
 Amount of Each Receipt this Period 40.16
 Memo Item

C. Rubin, Bernard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-741
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 180.32
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 115 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rubin, Bernard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-740
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Rutherford, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, Respiratory Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2991.63

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-105
 Amount of Each Receipt this Period 208.33
 Memo Item

C. Rutherford, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, Respiratory Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2991.63

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-105
 Amount of Each Receipt this Period 208.33
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 516.66 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 116 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sanders, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Vaccine Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-324
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Sanders, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Vaccine Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-324
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Sayed, Khalil, Ibrahim, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) General Procurement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-767
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 117 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sayed, Khalil, Ibrahim, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) General Procurement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-766
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Scott, Damon, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-133
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Scott, Damon, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-133
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 118 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Scott, Stephanie, Dare, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Internal Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-803
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Scott, Stephanie, Dare, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Internal Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-802
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Scruggs, Craig, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management ViiV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-802
 Amount of Each Receipt this Period 22.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 222.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 119 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Scruggs, Craig, D., , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-801 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 22.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 242.00 | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management ViiV | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sears, Timothy, Forrest, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-774 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 25.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 450.00 | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management ViiV | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sears, Timothy, Forrest, , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-773 |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 25.00 |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 450.00 | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management ViiV | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 72.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 120 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shelby, Ursula, D, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Acct Spec, Vaccines |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-650

Amount of Each Receipt this Period
15.26

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shelby, Ursula, D, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Acct Spec, Vaccines |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 21 | | 2023 |

Transaction ID : 2023091818498-650

Amount of Each Receipt this Period
15.26

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sleiman, Robert, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Rx Account Management Regional Vx |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
306.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 06 | | 2023 |

Transaction ID : 2023090118456-564

Amount of Each Receipt this Period
17.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 47.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 121 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sleiman, Robert, , , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-564 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="17.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Account Management Regional Vx | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="306.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Daniel, , , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-139 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="13.45"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Specialty Regional Sales Director | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="242.10"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Smith, Daniel, , , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-139 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="13.45"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Specialty Regional Sales Director | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="242.10"/> | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="43.90"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 122 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Smith, Sherry, Consetta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-570
 Amount of Each Receipt this Period
 32.04
 Memo Item

B. Smith, Sherry, Consetta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-570
 Amount of Each Receipt this Period
 32.04
 Memo Item

C. Snell, Christopher, Olpin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Account Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-769
 Amount of Each Receipt this Period
 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 114.08 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 123 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Snell, Christopher, Olpin, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-768 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 50.00 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Specialty Account Specialist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 540.00 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. St Louis, Julia, Hontz, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-248 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.26 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Marketing Director, Daprodustat | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 274.68 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. St Louis, Julia, Hontz, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-248 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.26 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr. Marketing Director, Daprodustat | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 274.68 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 80.52 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 124 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Steele, Casey, Lewis, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-76 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 37.54 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) District Sales Dir | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 675.72 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Steele, Casey, Lewis, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-76 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 37.54 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) District Sales Dir | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 675.72 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Stein, Nora, , , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-610 |
| Mailing Address 1250 S Collegeville Rd | | Amount of Each Receipt this Period 15.26 |
| City Collegeville | State PA | Zip Code 19426-2990 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Senior Counsel (Patents) | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 274.68 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 90.34 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 125 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Stein, Nora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Counsel (Patents)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-610
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Steirer, Joseph, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-306
 Amount of Each Receipt this Period 15.21
 Memo Item

C. Steirer, Joseph, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-306
 Amount of Each Receipt this Period 15.21
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.68 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 126 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Storino, Kimberly, Wallace, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-325 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Pricing/Reimbursement | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 273.78 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Storino, Kimberly, Wallace, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-325 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Pricing/Reimbursement | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 273.78 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Strand, Stefanie, Taylor, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-591 |
| Mailing Address 2929 Walnut Street | | Amount of Each Receipt this Period 70.00 |
| City Philadelphia | State PA | Zip Code 19104-5054 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Congresses Oversight Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 1260.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.42 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 127 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Strand, Stefanie, Taylor, , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-591 |
| Mailing Address 2929 Walnut Street | | Amount of Each Receipt this Period 70.00 |
| City Philadelphia | State PA | Memo Item <input type="checkbox"/> |
| Zip Code 19104-5054 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Congresses Oversight Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1260.00 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Strickland, John, Michael, , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2023 Transaction ID : 2023090118456-285 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Memo Item <input type="checkbox"/> |
| Zip Code 27701-3986 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) IP Risk Management & Tech Lead | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 273.78 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Strickland, John, Michael, , | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023 Transaction ID : 2023091818498-285 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 15.21 |
| City Durham | State NC | Memo Item <input type="checkbox"/> |
| Zip Code 27701-3986 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) IP Risk Management & Tech Lead | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 273.78 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.42 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 128 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sullivan, Shawn, Leonard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) General Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-701
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Sullivan, Shawn, Leonard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) General Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-701
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Sullivan, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1454.51

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-655
 Amount of Each Receipt this Period 82.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 172.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 129 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sullivan, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1454.51

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-655
 Amount of Each Receipt this Period 82.00
 Memo Item

B. Summers, Dena, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Health Outcomes
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-614
 Amount of Each Receipt this Period 15.26
 Memo Item

C. Summers, Dena, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Health Outcomes
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-614
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 112.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 130 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Swann, Mario, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 646.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-443
 Amount of Each Receipt this Period 36.34
 Memo Item

B. Swann, Mario, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 646.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-443
 Amount of Each Receipt this Period 36.34
 Memo Item

C. Tang, Robert, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing (Brand Lead), B
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-551
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 92.68 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 131 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Tang, Robert, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing (Brand Lead), B
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-551
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Taylor, Natalie, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Field Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-493
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Taylor, Natalie, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Field Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-493
 Amount of Each Receipt this Period
 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 132 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Thelen, Timothy, Alan, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-647 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 21.74 |
| City Durham | State NC | |
| Zip Code 27701-3986 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Asst General Counsel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 391.32 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Thelen, Timothy, Alan, , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-647 |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | Amount of Each Receipt this Period 21.74 |
| City Durham | State NC | |
| Zip Code 27701-3986 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Asst General Counsel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 391.32 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Thevenet, Philip, M., , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-515 |
| Mailing Address 1050 K St NW Ste 800 | | Amount of Each Receipt this Period 50.00 |
| City Washington | State DC | |
| Zip Code 20001-4450 | | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Director, Government Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 900.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 93.48 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | | |
|---|--|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 133 OF 161 | | |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 | <input type="checkbox"/> 11c <input type="checkbox"/> 15 | <input type="checkbox"/> 12 <input type="checkbox"/> 16 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Thevenet, Philip, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-515
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Thomas, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, Market Access
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 789.04

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-211
 Amount of Each Receipt this Period 44.17
 Memo Item

C. Thomas, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, Market Access
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 789.04

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-211
 Amount of Each Receipt this Period 44.17
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 138.34 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 134 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Tjaden, Kristen, , , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-723 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 52.09 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Public Policy | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 806.55 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tjaden, Kristen, , , | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-723 |
| Mailing Address PO Box 13398 | | Amount of Each Receipt this Period 52.09 |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Public Policy | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 806.55 | |

| | | |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Trotter, Joel, C, , | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-243 |
| Mailing Address 2929 Walnut Street | | Amount of Each Receipt this Period 15.26 |
| City Philadelphia | State PA | Zip Code 19104-5054 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr Counsel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 274.68 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 119.44 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 135 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Trotter, Joel, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-243
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Tulle, Jani, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-718
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Tulle, Jani, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-718
 Amount of Each Receipt this Period 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 136 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Turner, Kathleen, Conlin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 782.79

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-330
 Amount of Each Receipt this Period 44.34
 Memo Item

B. Turner, Kathleen, Conlin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 782.79

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-330
 Amount of Each Receipt this Period 44.34
 Memo Item

C. Umali, Romualdo, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-544
 Amount of Each Receipt this Period 15.21
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 103.89 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 137 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Umali, Romualdo, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-544
 Amount of Each Receipt this Period
 15.21
 Memo Item

B. Valles, Oscar, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-505
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Valles, Oscar, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-505
 Amount of Each Receipt this Period
 20.00
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.21 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 138 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vandev eer, Steven, T., ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.89

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-606

Amount of Each Receipt this Period 28.87

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vandev eer, Steven, T., ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.89

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-606

Amount of Each Receipt this Period 28.87

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vario, Frank, V., ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 396.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-175

Amount of Each Receipt this Period 22.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 79.74

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 139 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vario, Frank, V, ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Sr Acct Mgr, Vaccines |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-175

Amount of Each Receipt this Period
22.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vinas, Vanessa, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Respiratory Sales Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-782

Amount of Each Receipt this Period
22.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vinas, Vanessa, , ,

Mailing Address PO Box 13398

| | | |
|----------------|-------------|------------------------|
| City Durham | State NC | Zip Code 27709-3398 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) GlaxoSmithKline LLC | Occupation (for Individual) Respiratory Sales Specialist |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
396.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-781

Amount of Each Receipt this Period
22.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 66.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 140 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Volzer, Jan, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Viiv
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-279
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Volzer, Jan, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Viiv
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2023
Transaction ID : 2023091818498-279
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Wagner, Julie, Midori, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 273.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2023
Transaction ID : 2023090118456-284
 Amount of Each Receipt this Period
 15.20
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 65.20 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 141 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wagner, Julie, Midori, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-284 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="15.20"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Sr Acct Spec, Vaccines | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="273.60"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Walby, Nicole, M, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023090118456-498 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Oncology Account Manager | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | | |

| | | | |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Walby, Nicole, M, , | | | Date of Receipt |
| Mailing Address PO Box 13398 | | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 | Transaction ID : 2023091818498-498 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Oncology Account Manager | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="900.00"/> | | |

| | |
|---|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="115.20"/> |
| TOTAL This Period (last page this line number only)..... | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 142 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Walker, John, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.37

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-253
 Amount of Each Receipt this Period 34.86
 Memo Item

B. Walker, John, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.37

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-253
 Amount of Each Receipt this Period 34.86
 Memo Item

C. Warren, Samantha, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) DEI Director - ERG, Strat Partnerships
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.78

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-612
 Amount of Each Receipt this Period 15.21
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 84.93 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 143 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Warren, Samantha, W., , | | Date of Receipt |
| Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27701-3986 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-612 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) DEI Director - ERG, Strat Partnerships |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="273.78"/> | Amount of Each Receipt this Period <input type="text" value="15.21"/> |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weinberg, Harry, , , | | Date of Receipt |
| Mailing Address PO Box 13398 | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023090118456-214 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Field Vice President |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="1350.00"/> | Amount of Each Receipt this Period <input type="text" value="75.00"/> |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weinberg, Harry, , , | | Date of Receipt |
| Mailing Address PO Box 13398 | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2023"/> |
| City Durham | State NC | Zip Code 27709-3398 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 2023091818498-214 |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Field Vice President |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="1350.00"/> | Amount of Each Receipt this Period <input type="text" value="75.00"/> |
| <input type="checkbox"/> Memo Item | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="165.21"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 144 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Weisser, Steven, M, , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-600 | | |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 15.21 | | |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Scientific Project Leadership | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.78 | | | |

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weisser, Steven, M, , | | | Date of Receipt MM / DD / YYYY 09 / 21 / 2023 Transaction ID : 2023091818498-600 | | |
| Mailing Address 1250 S Collegeville Rd | | | Amount of Each Receipt this Period 15.21 | | |
| City Collegeville | State PA | Zip Code 19426-2990 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Scientific Project Leadership | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 273.78 | | | |

| | | | | | |
|---|-------------|--|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weitzel, David, M., , | | | Date of Receipt MM / DD / YYYY 09 / 06 / 2023 Transaction ID : 2023090118456-124 | | |
| Mailing Address PO Box 13398 | | | Amount of Each Receipt this Period 31.69 | | |
| City Durham | State NC | Zip Code 27709-3398 | <input type="checkbox"/> Memo Item | | |
| FEC ID number of contributing federal political committee. C | | | | | |
| Name of Employer (for Individual) GlaxoSmithKline LLC | | Occupation (for Individual) Rx Sales Primary Care | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 561.88 | | | |

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 62.11 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 145 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Weitzel, David, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 561.88

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-124
 Amount of Each Receipt this Period 31.69
 Memo Item

B. Wesolowski, Lisa, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 592.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-391
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Wesolowski, Lisa, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 592.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-391
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 131.69 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 146 OF 161 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Whaling, Matty, Shawn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Immunology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-470
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Whaling, Matty, Shawn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Immunology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-470
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Williams, Jeffrey, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-228
 Amount of Each Receipt this Period 15.26
 Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.26 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 147 OF 161 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Williams, Jeffrey, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.68

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-228
 Amount of Each Receipt this Period 15.26
 Memo Item

B. Wilson, Sarah, Strickland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-573
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Wilson, Sarah, Strickland, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-573
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 65.26
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 148 OF 161
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Winters, Stephen, Matthew, ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2023
Transaction ID : 2023090118456-732

Amount of Each Receipt this Period 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Winters, Stephen, Matthew, ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2023
Transaction ID : 2023091818498-731

Amount of Each Receipt this Period 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | 16693.05 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Mechanics & Farmers Bank

Mailing Address PO Box 1932

City
Durham

State
NC

Zip Code
27702

Purpose of Disbursement

Bank Fees

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : 4FFB9073B9!

Amount of Each Disbursement this Period

80.60

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| | | | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| | | | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

80.60

80.60

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Barragan For Congress

Mailing Address 1840 SOUTH GAFFEY STREET #421

City
SAN PEDRO

State
CA

Zip Code
90731

Purpose of Disbursement
2024 Primary

011

Candidate Name

Barragan, Nanette, Diaz, ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00577353

Transaction ID : D12F579BC7

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bluegrass Committee

Mailing Address 228 S Washington St
Ste 115

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
2023 Contribution

011

Candidate Name

Bluegrass Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2023
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00235655

Transaction ID : 8F5F64B57B4

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. David Rouzer For Congress

Mailing Address PO Box 3142

City
Wilmington

State
NC

Zip Code
28406-0142

Purpose of Disbursement
2024 Primary

011

Candidate Name

Rouzer, David, Cheston, ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NC District: 07

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00501643

Transaction ID : 078219A4F3

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. DCCC

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 | | |

Mailing Address 430 S Capitol St SE
FI 2

City
Washington

State
DC

Zip Code
20003-4024

FEC Identification Number

C C0000935

Transaction ID : 34024F5FE91

Amount of Each Disbursement this Period

7500.00

Memo Item

Purpose of Disbursement
2023 Contribution

011
Category/
Type

Candidate Name
DCCC

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2023
 Primary General
 Other (specify) **Contribution**

Full Name (Last, First, Middle Initial)

B. Kuster For Congress, Inc

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 | | |

Mailing Address PO Box 1498

City
Concord

State
NH

Zip Code
03302

FEC Identification Number

C C00462861

Transaction ID : 35E6A885FE4

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
2024 Primary

011
Category/
Type

Candidate Name
Kuster, Ann, McLane, ,

Office Sought: House
 Senate
 President
State: NH District: 02

Disbursement For: 2024
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

C. Lori Trahan For Congress Committee

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 | | |

Mailing Address PO Box 1161

City
Lowell

State
MA

Zip Code
01853

FEC Identification Number

C C00655647

Transaction ID : EDB9A9F6B1

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
2024 Primary

011
Category/
Type

Candidate Name
Trahan, Lori, Loureiro, ,

Office Sought: House
 Senate
 President
State: MA District: 03

Disbursement For: 2024
 Primary General
 Other (specify)

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

Form A: Ma 4 Dems PAC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Marc Veasey Congressional Campaign Committee. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: NRCC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 9500.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Tony Cardenas For Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 29 | / | 2023 |

Mailing Address 122 C St NW
Ste 360

City
Washington

State
DC

Zip Code
20001

FEC Identification Number

C C00498873

Transaction ID : 877A6AB59E

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
2024 Primary

011

Category/
Type

Candidate Name

Cardenas, Tony, . .

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: CA District: 29

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Mailing Address

City

State

Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Mailing Address

City

State

Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

27000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Au for Georgia Inc

Mailing Address 5805 State Bridge Road Suite G#238

City
Johns Creek

State
GA

Zip Code
30097

Purpose of Disbursement
Voided 7/24/23 Disbursement

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 8 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 3F360E8A824

Amount of Each Disbursement this Period

| | |
|------------|----------|
| [REDACTED] | - 250.00 |
|------------|----------|

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Castro

Mailing Address PO Box 1506

City
Elgin

State
IL

Zip Code
60121

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : C0F62F52BB'

Amount of Each Disbursement this Period

| | |
|------------|--------|
| [REDACTED] | 250.00 |
|------------|--------|

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Javier Martinez

Mailing Address PO Box 25491

City
Albuquerque

State
NM

Zip Code
87125

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : DFA0750F29

Amount of Each Disbursement this Period

| | |
|------------|--------|
| [REDACTED] | 750.00 |
|------------|--------|

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | |
|------------|--------|
| [REDACTED] | 750.00 |
|------------|--------|

| | |
|------------|--|
| [REDACTED] | |
|------------|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Mark Newton

Mailing Address 2851 Washington Rd - Ste 201

City Augusta State GA Zip Code 30909

Purpose of Disbursement
Voided 7/24/23 Disbursement

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D920AE0112
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Cowsert for Senate

Mailing Address 2405 West Broad St - Ste 250

City Athens State GA Zip Code 30606

Purpose of Disbursement
Voided 7/24/23 Disbursement

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 41A920D6EAI
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Doris Turner

Mailing Address 2100 E Lawrence Ave

City Springfield State IL Zip Code 62705

Purpose of Disbursement
Nonfederal Contribution

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : C23F568185
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Jawaharial Omarr Williams

Mailing Address 1648 W Warren

City Chicago State IL Zip Code 60612

Purpose of Disbursement Nonfederal Contribution
Candidate Name
Category/Type 011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2023

FEC Identification Number
C
Transaction ID : 8E77DE4EF6
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of John Curran

Mailing Address 5926 Grand Avenue

City Downers Grove State IL Zip Code 60516

Purpose of Disbursement Nonfederal Contribution
Candidate Name
Category/Type 011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2023

FEC Identification Number
C
Transaction ID : 5E3886340CE
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Justin Busch

Mailing Address PO Box 2182

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement Nonfederal Contribution
Candidate Name
Category/Type 011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2023

FEC Identification Number
C
Transaction ID : E0B589D777
Amount of Each Disbursement this Period
500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Laura Fine

Mailing Address 1700 Constitution Dr

City Glenview

State IL

Zip Code 60026

Purpose of Disbursement Nonfederal Contribution

011 Category/Type

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date field: 09 / 29 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : CCAB187309

Amount of Each Disbursement this Period

Amount field: 250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Mattie Hunter

Mailing Address PO Box 439430

City Chicago

State IL

Zip Code 60643

Purpose of Disbursement Nonfederal Contribution

011 Category/Type

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date field: 09 / 29 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : 7B192C18D74

Amount of Each Disbursement this Period

Amount field: 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Rachael Cabral Guevara

Mailing Address 190 River Island Ct

City Appleton

State WI

Zip Code 54914

Purpose of Disbursement Nonfederal Contribution

011 Category/Type

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date field: 09 / 29 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : 67722C63EE

Amount of Each Disbursement this Period

Amount field: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Subtotal field: 1000.00

Total field: [Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Sue Rezin

Mailing Address PO Box 932

City
Morris

State
IL

Zip Code
60450

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [Redacted]

Transaction ID : FE2AFF2C65

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Tina Kotek

Mailing Address PO Box 42307

City
Portland

State
OR

Zip Code
97242

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [Redacted]

Transaction ID : DF3EF630AA

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends to Elect Harry Benton

Mailing Address 13250 Sunderlin Rd

City
Plainfield

State
IL

Zip Code
60585

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [Redacted]

Transaction ID : DA68C8CC8I

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Gerald Boudreaux Campaign

Mailing Address PO Box 91245

City
Lafayette

State
LA

Zip Code
70509

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 51DD461F7E

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hatchett for Georgia

Mailing Address PO Box 2706

City
Clarksville

State
GA

Zip Code
30523

Purpose of Disbursement
Voided 7/24/23 Disbursement

011

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 8 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 955DE7AC3C

Amount of Each Disbursement this Period

[REDACTED] - 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. J. Cameron Henry Campaign

Mailing Address PO Box 23173

City
Jefferson

State
LA

Zip Code
70183

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : CADD3652B:

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 1750.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Mary for Illinois

Mailing Address PO Box 6506

City
Libertyville

State
IL

Zip Code
60048

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 65CC711DD3

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Memo Item

Full Name (Last, First, Middle Initial)

B. Matt Brass for State Senate

Mailing Address PO Box 1313

City
Newnan

State
GA

Zip Code
30264

Purpose of Disbursement
Voided 7/24/23 Disbursement

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 8 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 954D273A34E

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| - | 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Reese Campaign

Mailing Address PO Box 1698

City
Leesville

State
LA

Zip Code
71496

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

C [REDACTED]

Transaction ID : 9E5B2A2660

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Testin for Senate

Mailing Address 5369 Fairview Dr

City
Stevens Point

State
WI

Zip Code
54482

Purpose of Disbursement
Nonfederal Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

Transaction ID : 26FAE19390I

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Walker for Indiana

Mailing Address 6919 Royal Oakland Dr

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
Nonfederal Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 2 | 3 |

FEC Identification Number

Transaction ID : 23B2ACCD06

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶